

Assessing Healthy People 2010 Goals for People with Disabilities in Los Angeles County

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Healthy People 2010 Goals

- Include in the core of HP2010 surveillance tools a standard set of questions that identify people with disabilities.
- Increase the number of states that have public health surveillance and health promotion programs for people with disabilities and their caregivers.

Healthy People 2010 Goals (continued)

- Eliminate employment rate disparities between working-aged (18-62 years) adults with and without disabilities.

Healthy People 2010 Goals (continued)

- Reduce the proportion of adults with disabilities who report feelings, such as sadness, unhappiness, or depression, that prevent them from being active.

Healthy People 2010 Goals (continued)

- Increase the proportion of adults with disabilities who
 - report satisfaction with life
 - report having sufficient emotional support
 - participate in social activities

Healthy People 2010 Goals (continued)

- Reduce the proportion of people with disabilities who report
 - not having the assistive devices and technology they need
 - encountering environmental barriers to participating in home, school, work, or community activities

Mission of the Office of Health Assessment and Epidemiology

- To ensure the availability of high quality and comprehensive health data on the Los Angeles County population and to facilitate its use for public health assessment, policy development, program planning and evaluation.

Key Analysis Objectives

- To obtain reliable population estimates for selected health indicators by sex, race/ethnicity, and SPAs (8 regions in the county).
- To identify disparities across population subgroups.
- To track temporal trends.
- To compare with state and national data and with national health objectives.

Los Angeles County Health Survey: Background

- Population-based, RDD telephone survey of Los Angeles County residents
- Representative of Adults in L.A. County
- Three surveys: 1997; 1999-2000; 2002-2003
- Beginning analysis - 2005

2002-2003 L.A.C.H.S. Adult Component Content

- Demographics
- Health conditions (e.g., diabetes, heart disease, depression)
- Health behaviors (e.g., alcohol consumption, cigarette smoking, physical activity, obesity)
- Insurance status
- Access and barriers to health care

2002-2003 L.A.C.H.S. Languages of Interviews

Language

• English	6303 (72%)
• Spanish	1609 (23%)
• Cantonese	68 (1%)
• Mandarin	85 (2%)
• Korean	60 (1%)
• Vietnamese	42 (<1%)

2002-2003 L.A.C.H.S. Disability Methods/Measures

The next questions ask about any long-term health impairments or disabilities you may have that have lasted or can be expected to last for at least 3 months.

Disability Methods/Measures (continued)

- Are you limited in any way in any activities because of a physical, mental, or emotional problem?
- Do you now have any health problem that requires you to use special equipment, such as a cane, a wheelchair, a special bed, or a special telephone?
- Do you consider yourself a person with a disability?

2002-2003 L.A.C.H.S.: Results

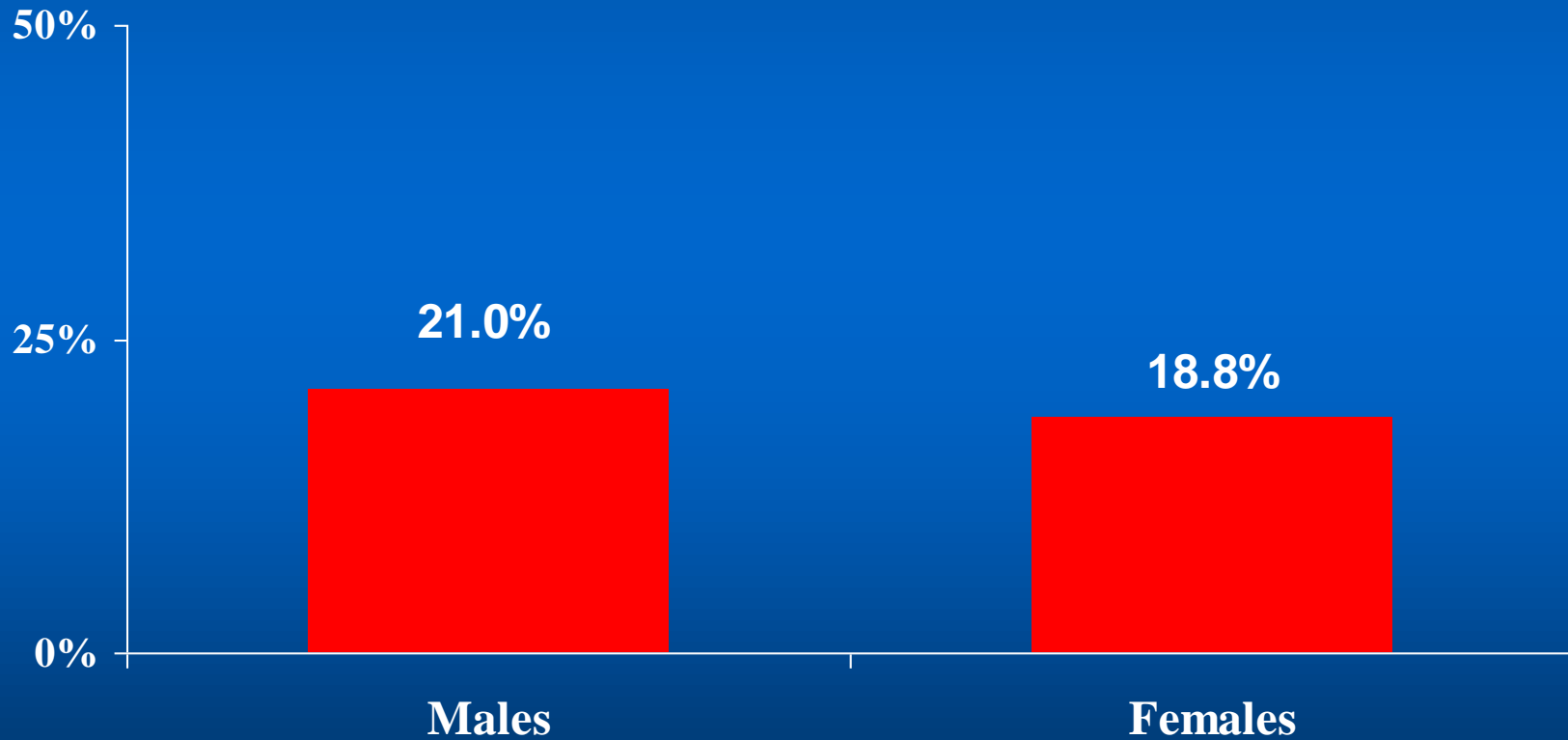
19.8%*

Adults in L.A. County
Reported Having a Disability

*Age-adjusted to the 2000 U.S. standard
population aged 18 years and older.

2002-2003 Los Angeles County Health Survey
Department of Health Services, Public Health

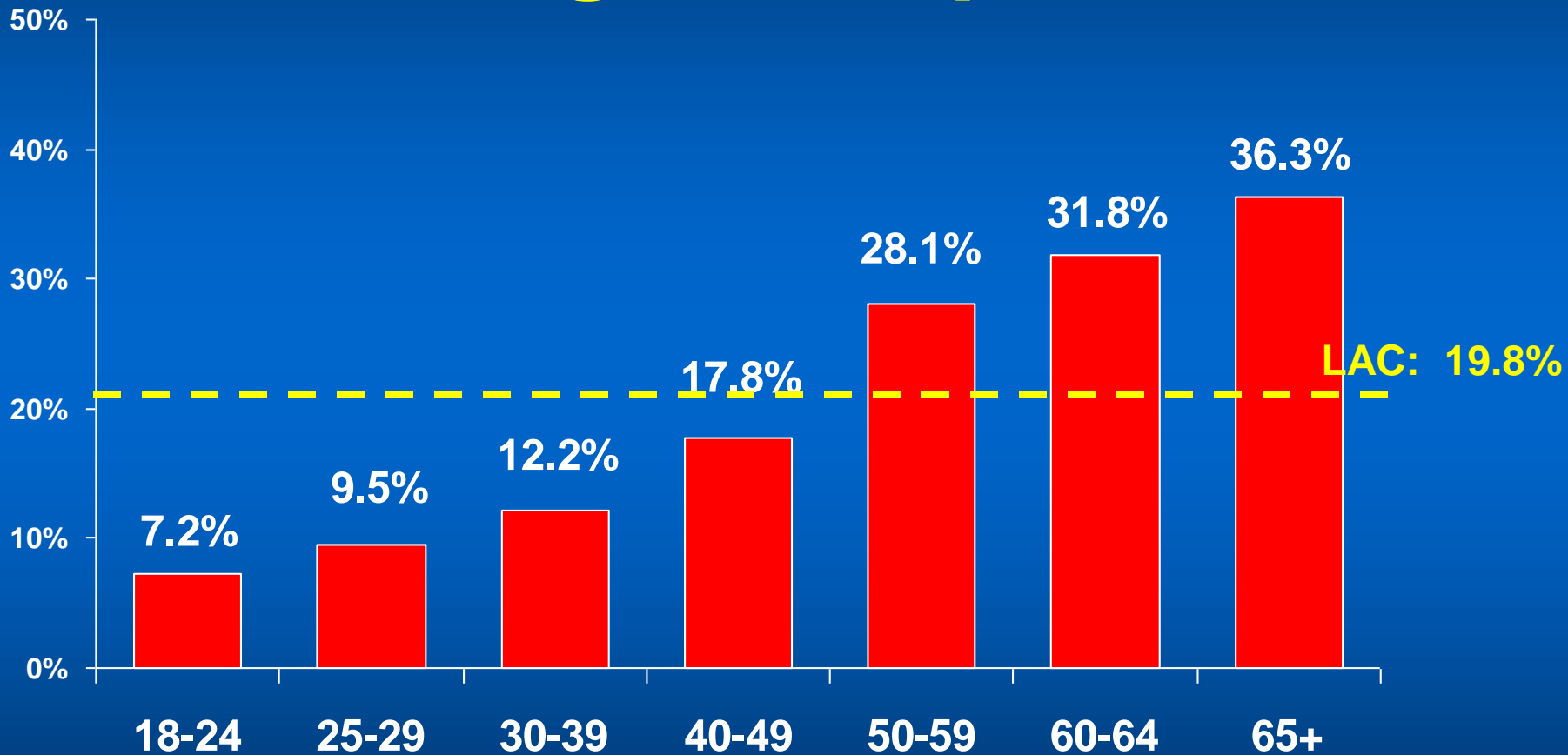
Prevalence* of Disability by Gender



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

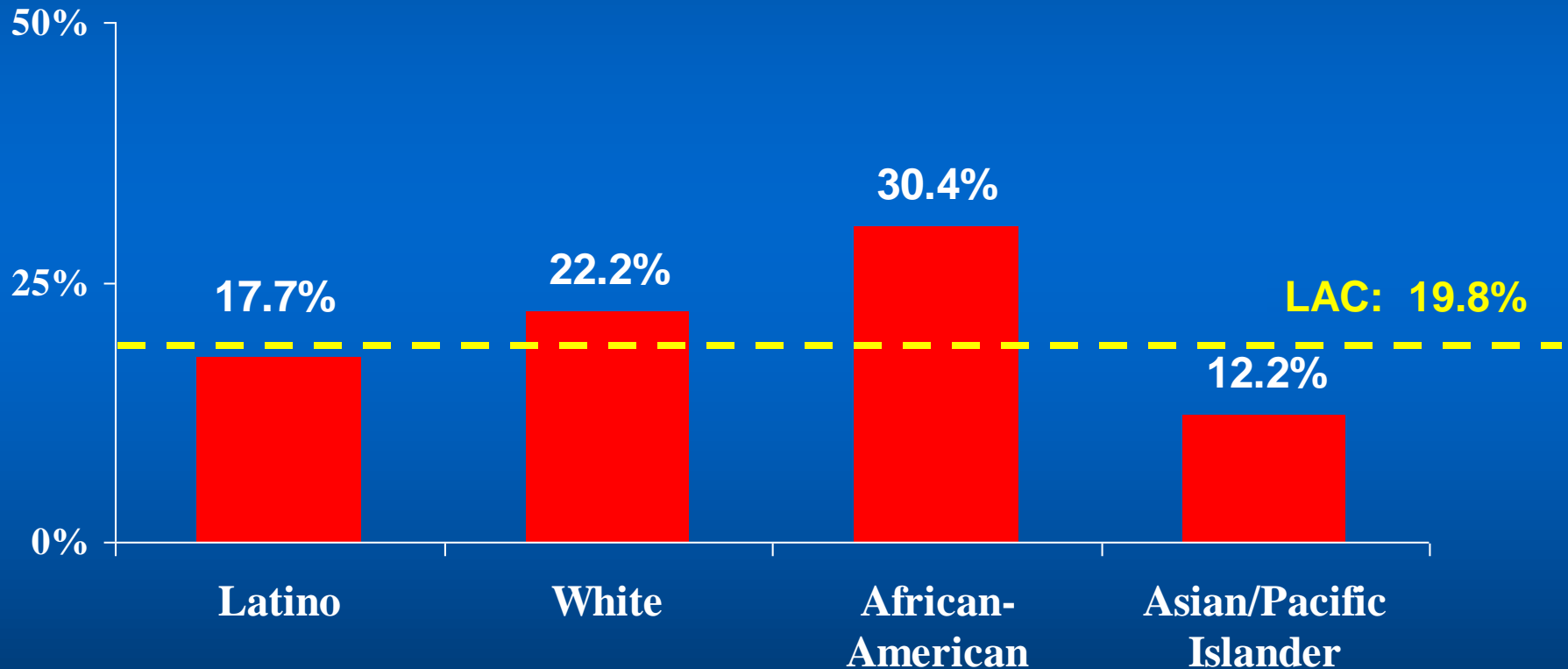
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Prevalence of Disability by Age Group



Age (years)

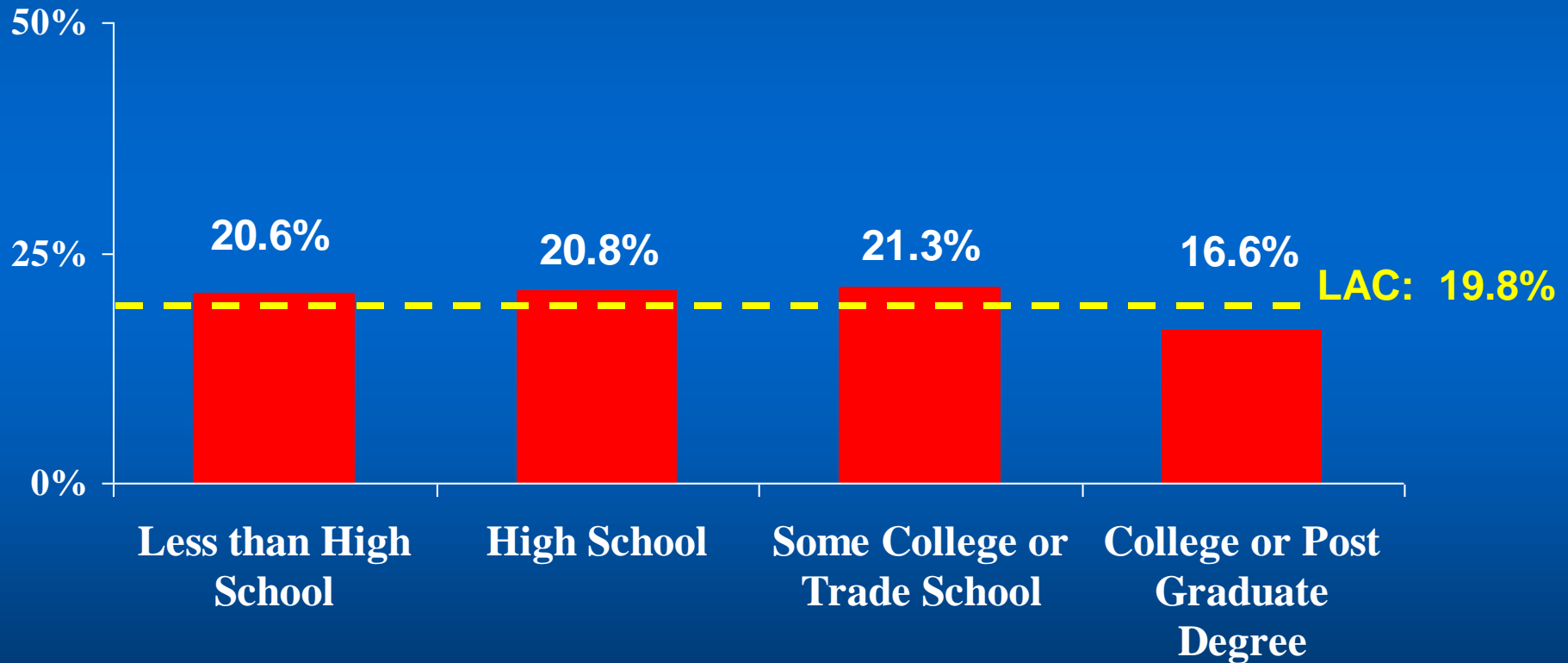
Prevalence* of Disability by Race/Ethnicity



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

2002-2003 Los Angeles County Health Survey
Department of Health Services, Public Health

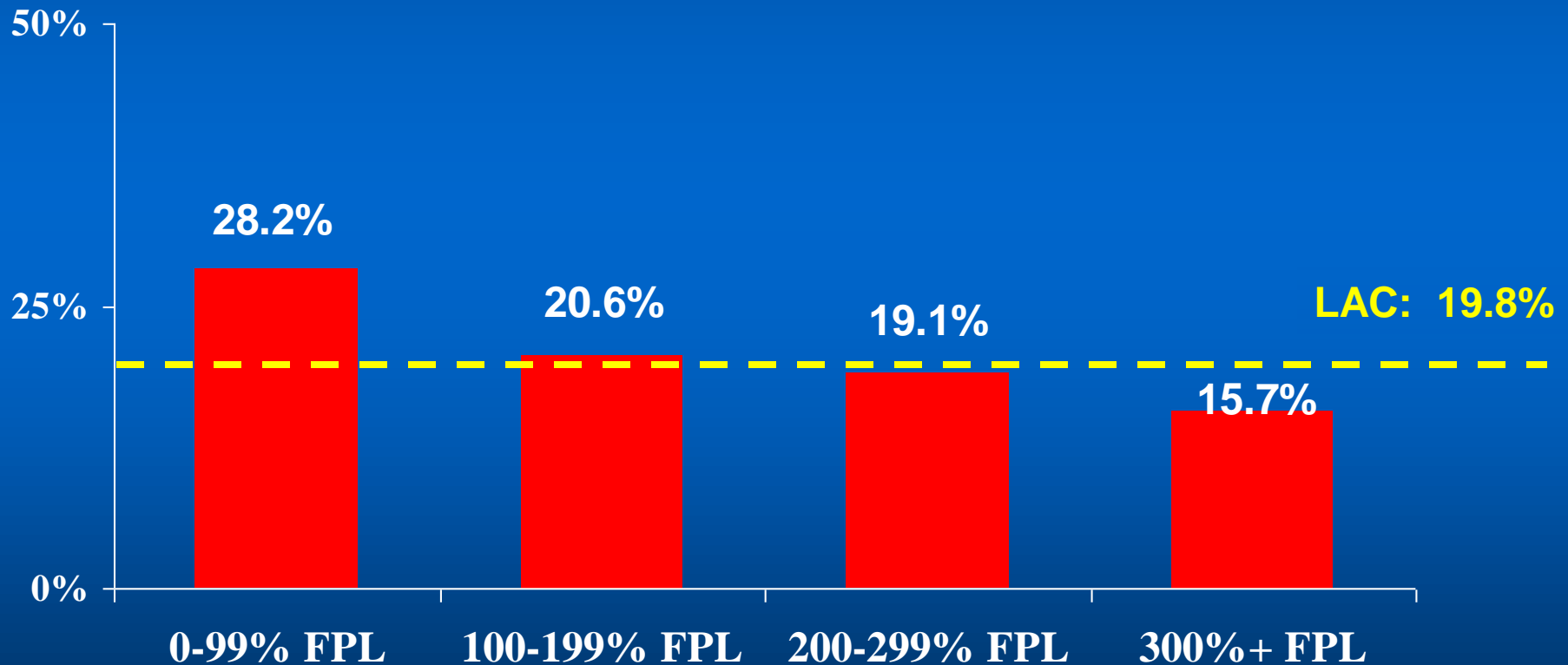
Prevalence* of Disability by Education



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

2002-2003 Los Angeles County Health Survey
Department of Health Services, Public Health

Prevalence* of Disability by Federal Poverty Level (FPL)



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

2002-2003 Los Angeles County Health Survey
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Types of Disabilities

Physical disability

- Lack of mobility
- Limitation in body movement such as standing, crouching, bending, or sitting
- Difficulty gripping, holding, or manipulating small objects or carrying light loads

Types of Disabilities (continued)

Sensory disability

- Difficulty hearing
- Problems seeing

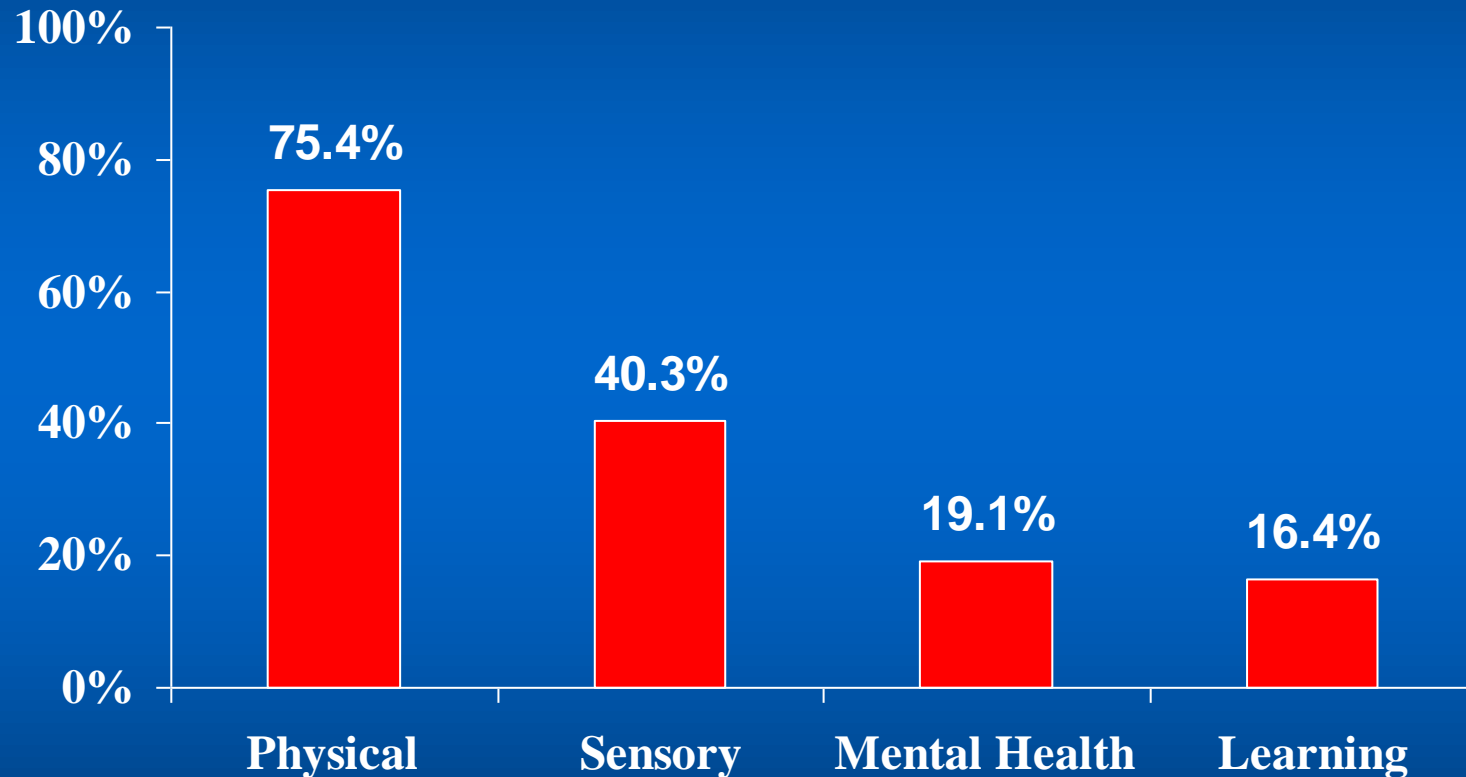
Mental health disability

- Mental health condition as a disability

Learning disability

- Problems with learning

Prevalence* of Type of Disability**



**PWDs may have reported more than one type of disability.

2002-2003 Los Angeles County Health Survey
Department of Health Services, Public Health

*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

Percent* of Multiple Disabilities

One type of disability 45.0%

Two types of disabilities 27.0%

Three types of disabilities 9.7%

Four (all) types of disabilities 5.3%

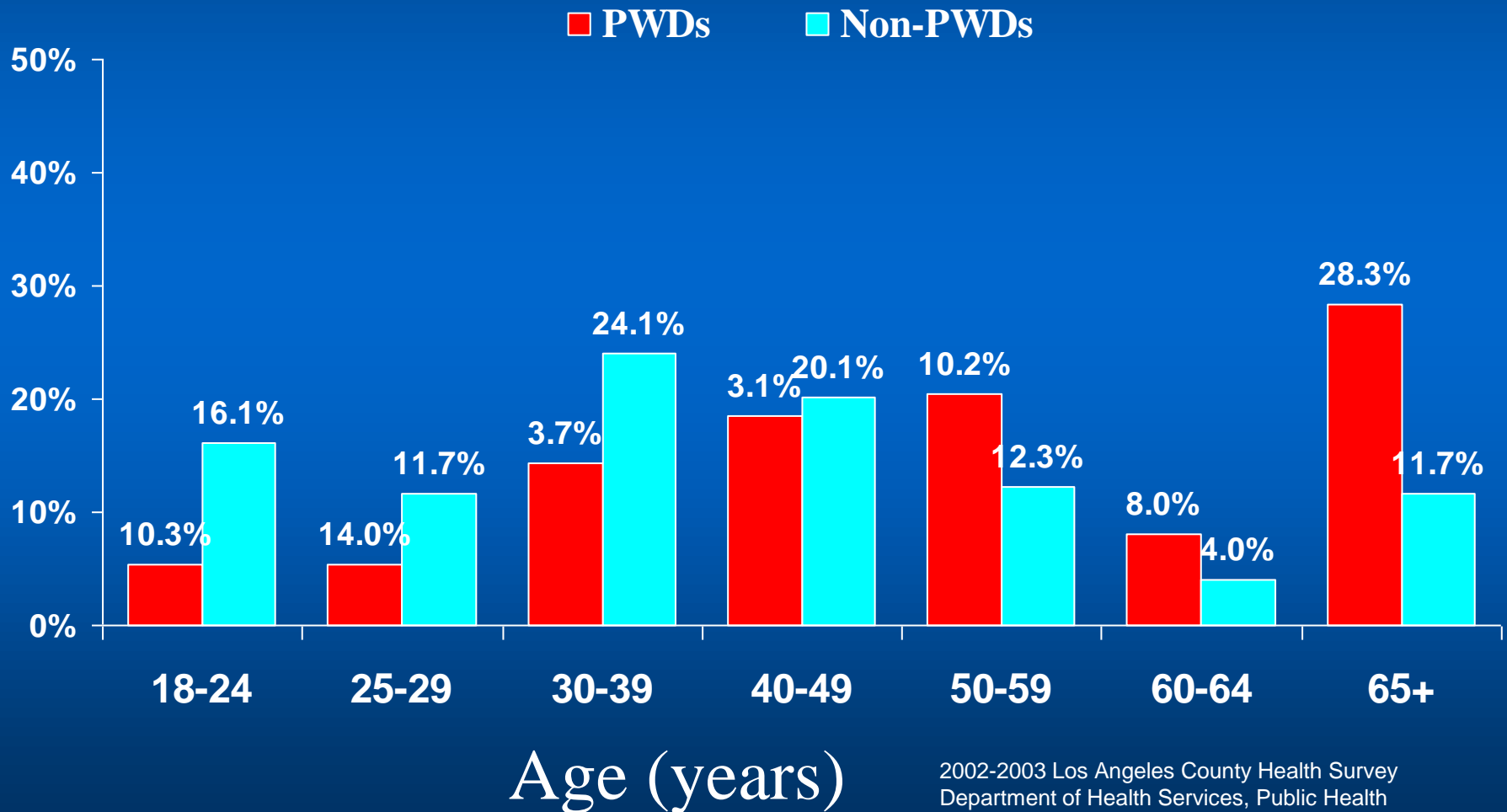
Note: 13% of PWDs reported that their type of disability was not captured in any of the categories – physical, sensory, mental health, or learning disability.

*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

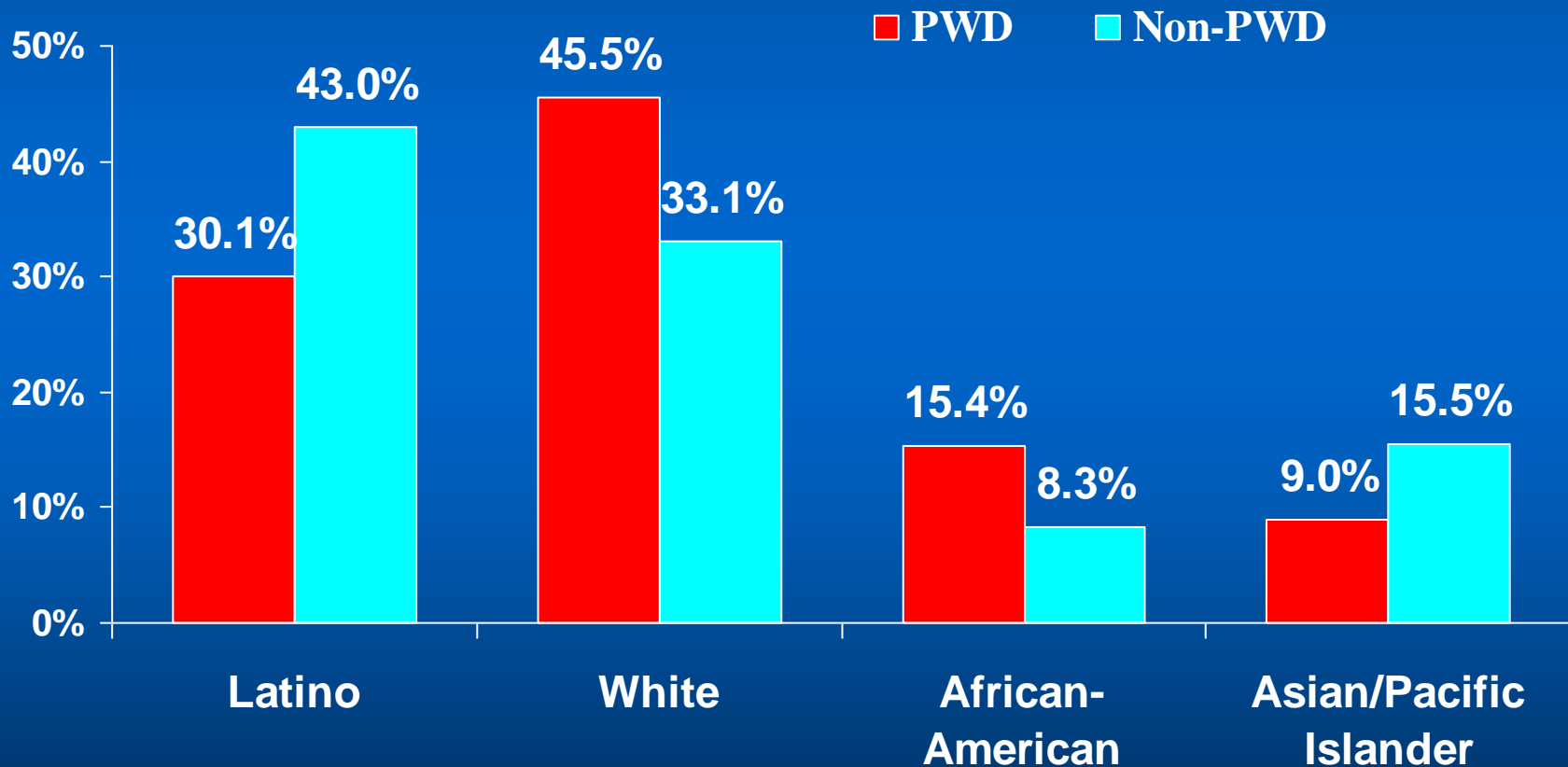
**Comparing
Persons with a Disability (PWD) to
Persons without a Disability:**

Demographics

Distribution of Age by PWDs and Non-PWDs



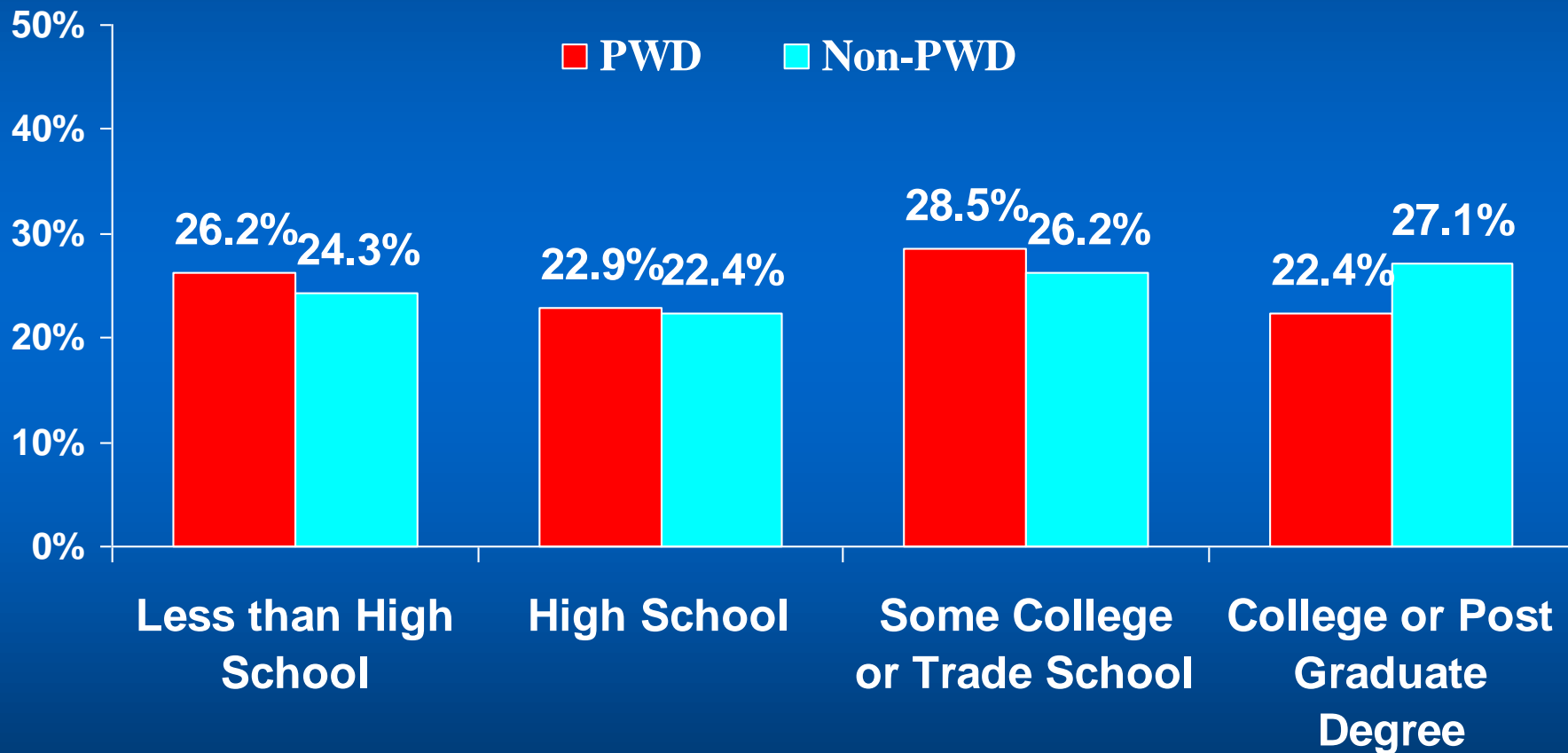
Distribution* of Race/Ethnicity by PWDs and Non-PWDs



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

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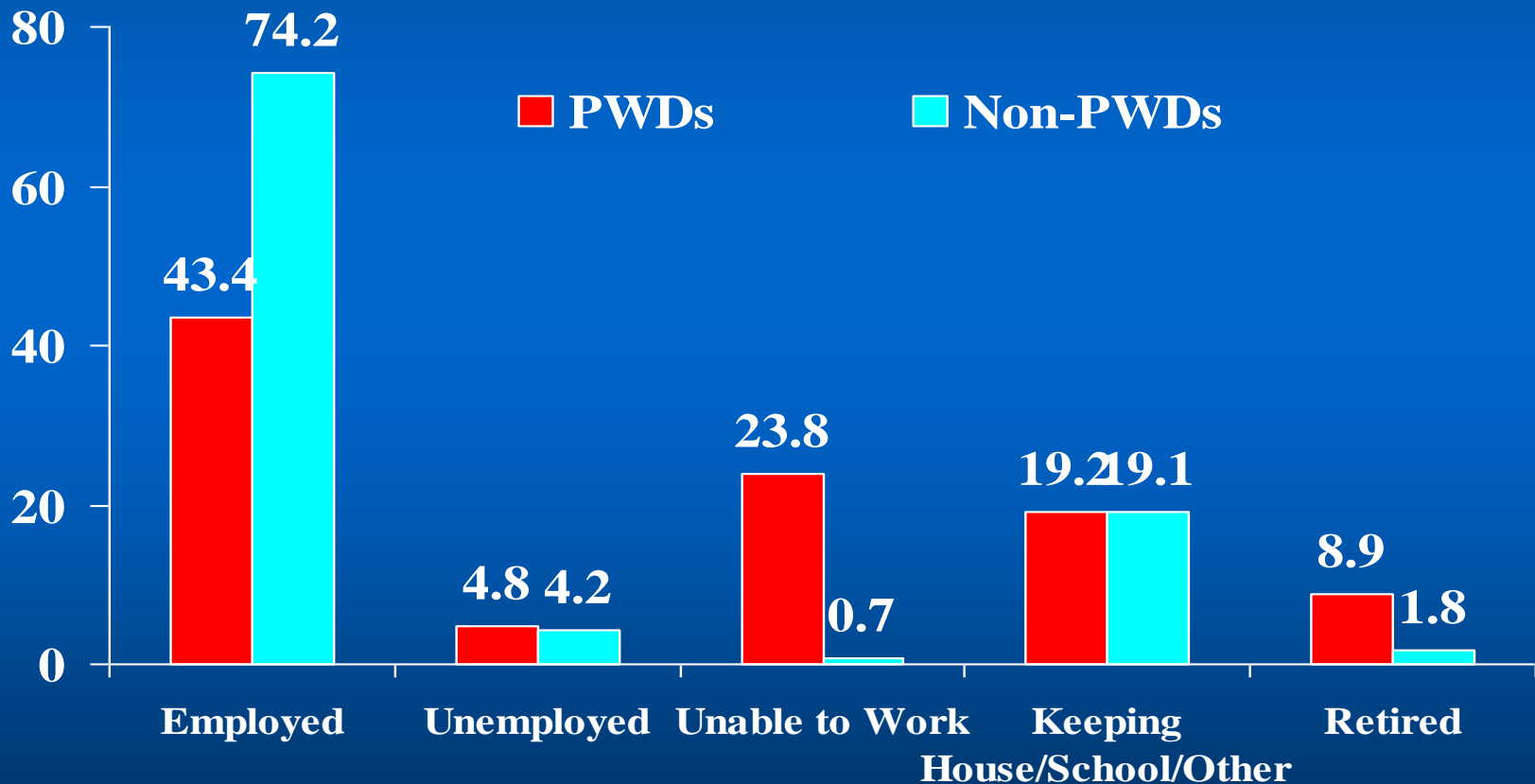
Distribution* of Education by PWDs and Non-PWDs



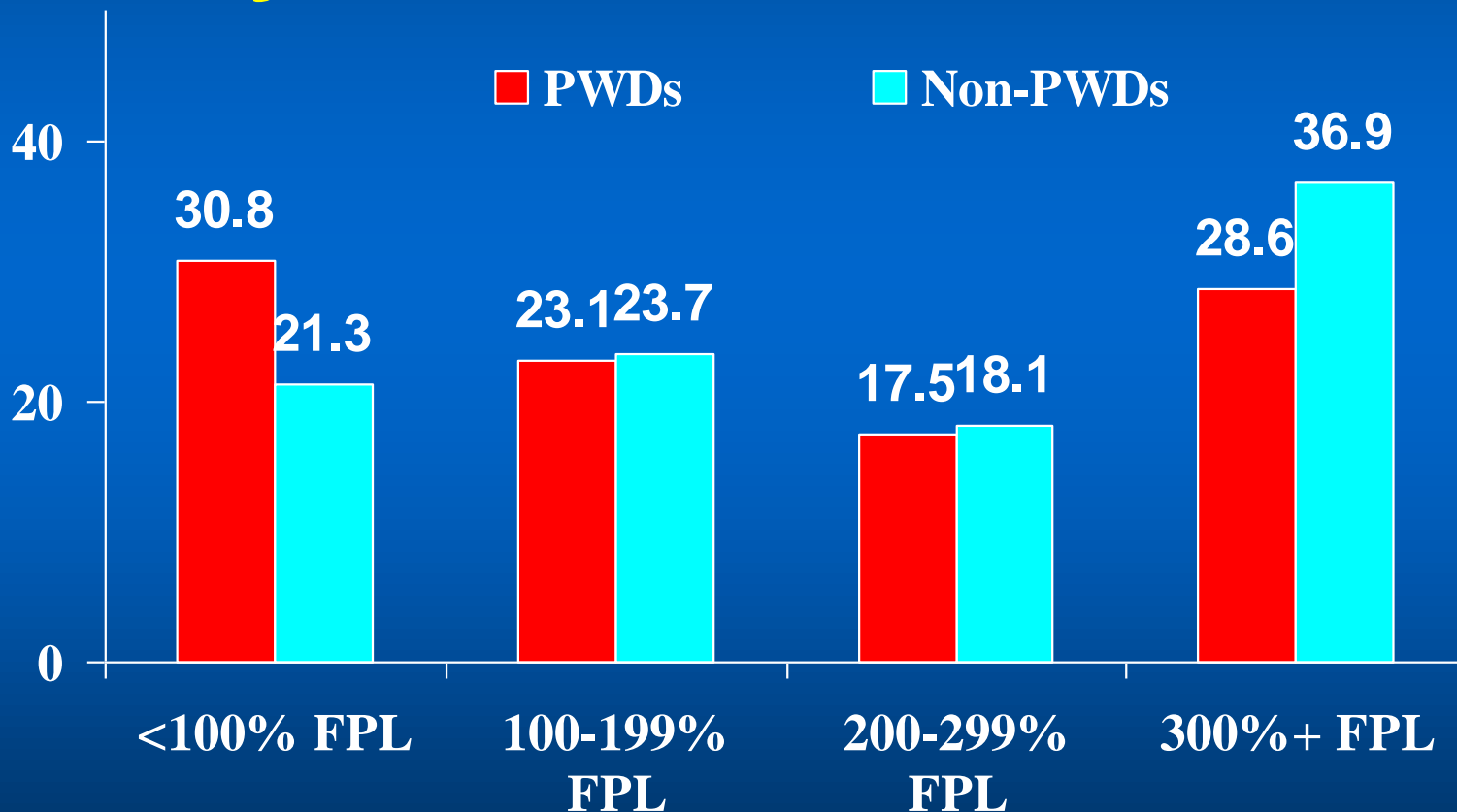
*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

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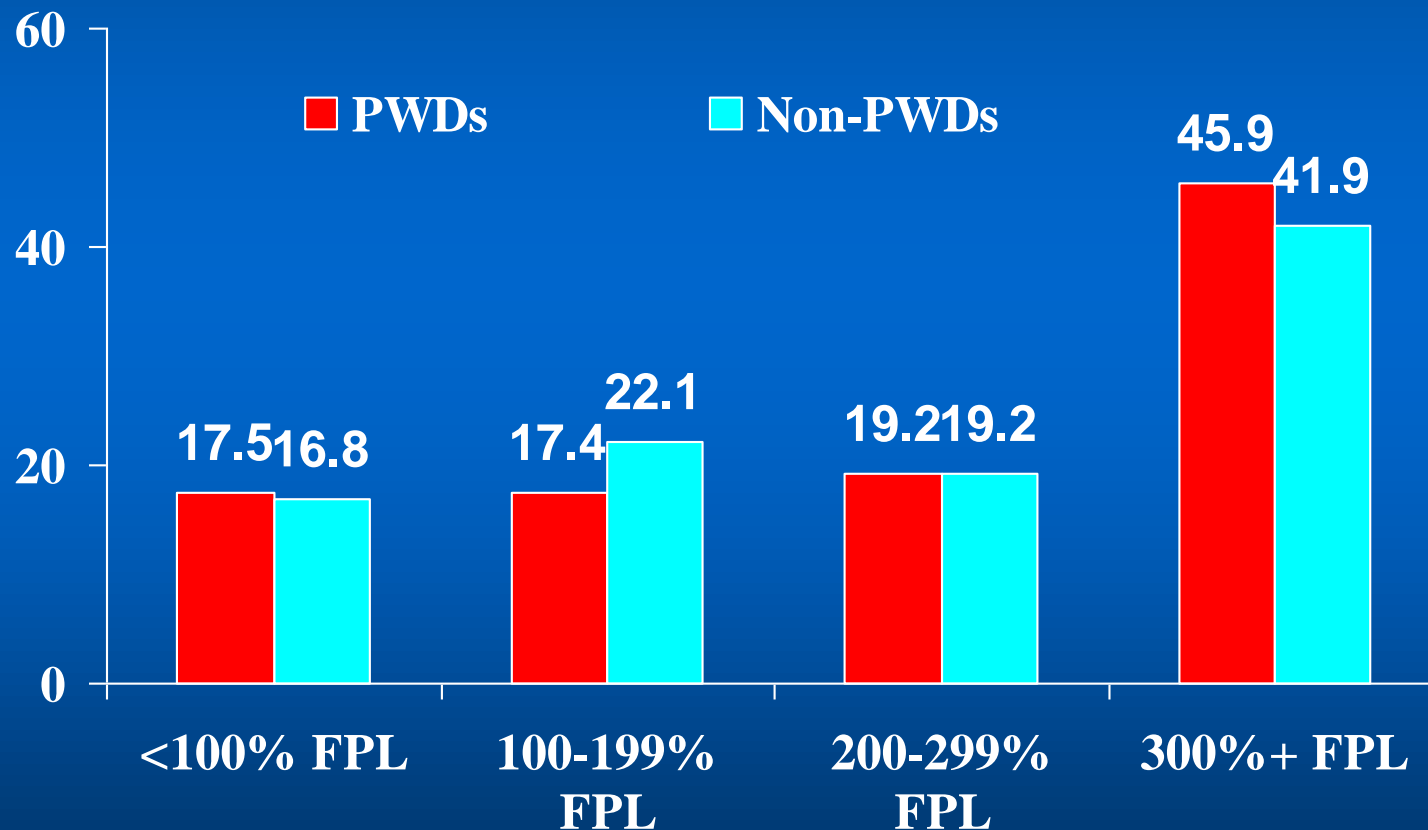
Distribution of Employment Status Among Working-Aged (18-64 yrs) by PWDs and Non-PWDs



Distribution of FPL Among Working-Aged Adults (18-64 yrs) by PWDs and Non-PWDs



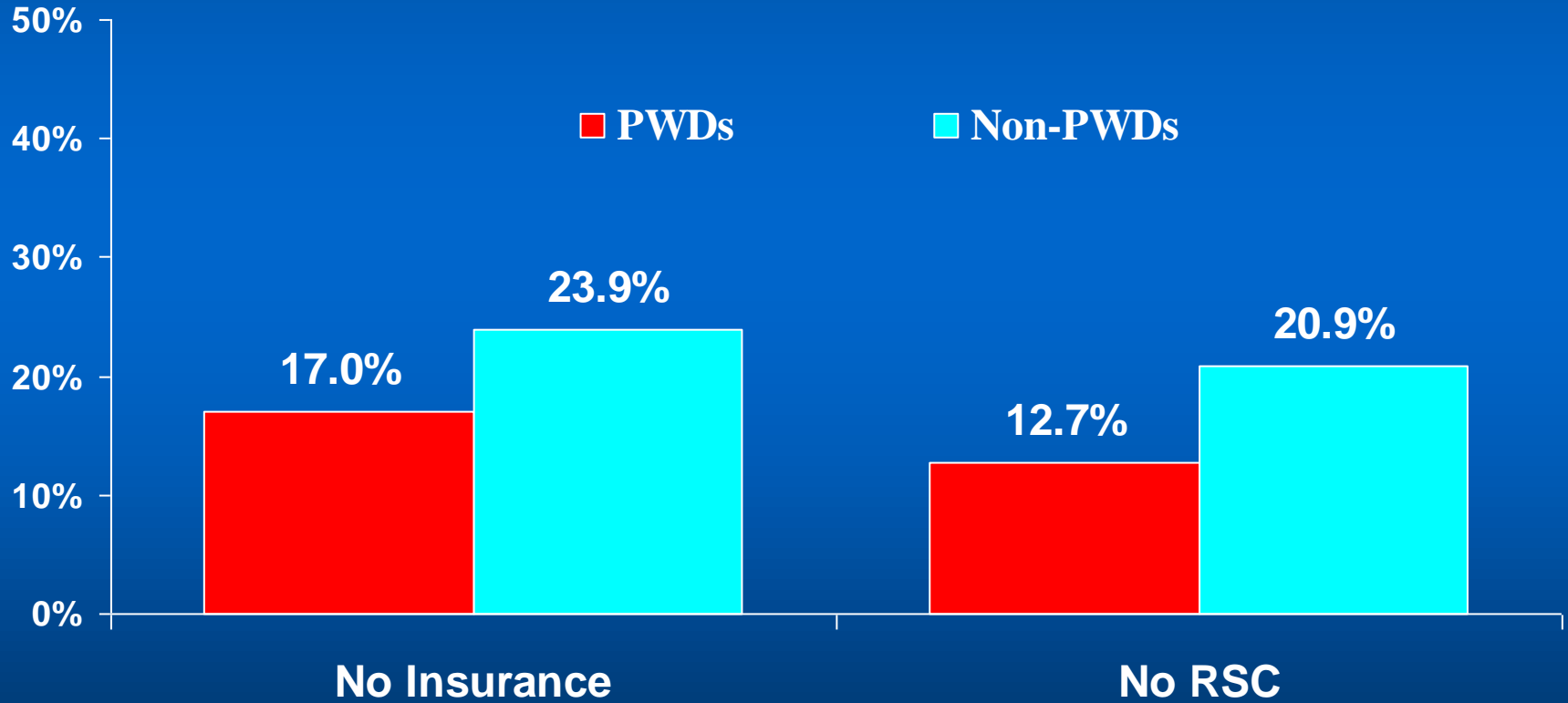
FPL for *Employed Working-Aged Adults (18-64 yrs)* by PWDs and Non-PWDs



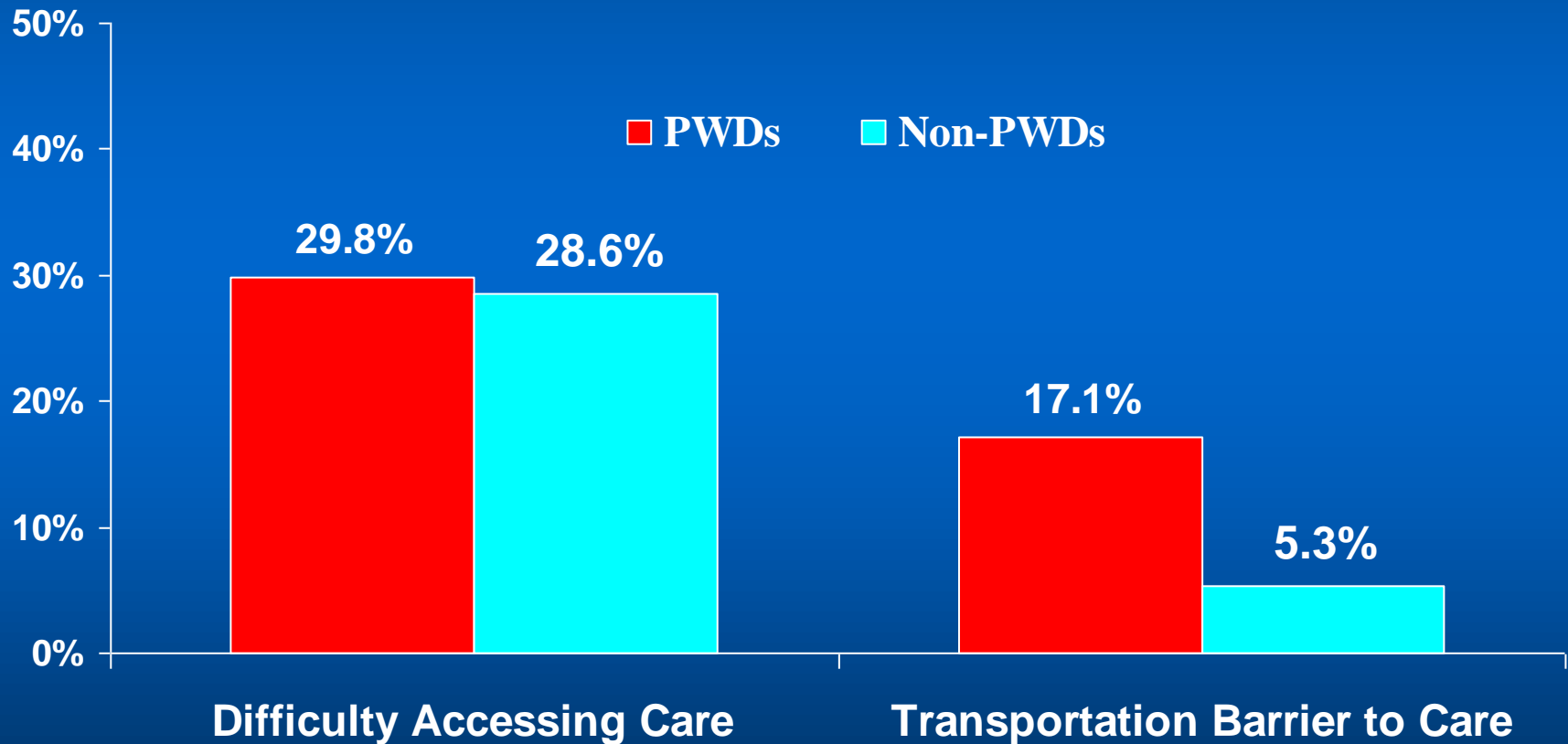
**Comparing
Persons with a Disability (PWD) to
Persons without a Disability:**

**Insurance & Access/Barriers
to Health Care**

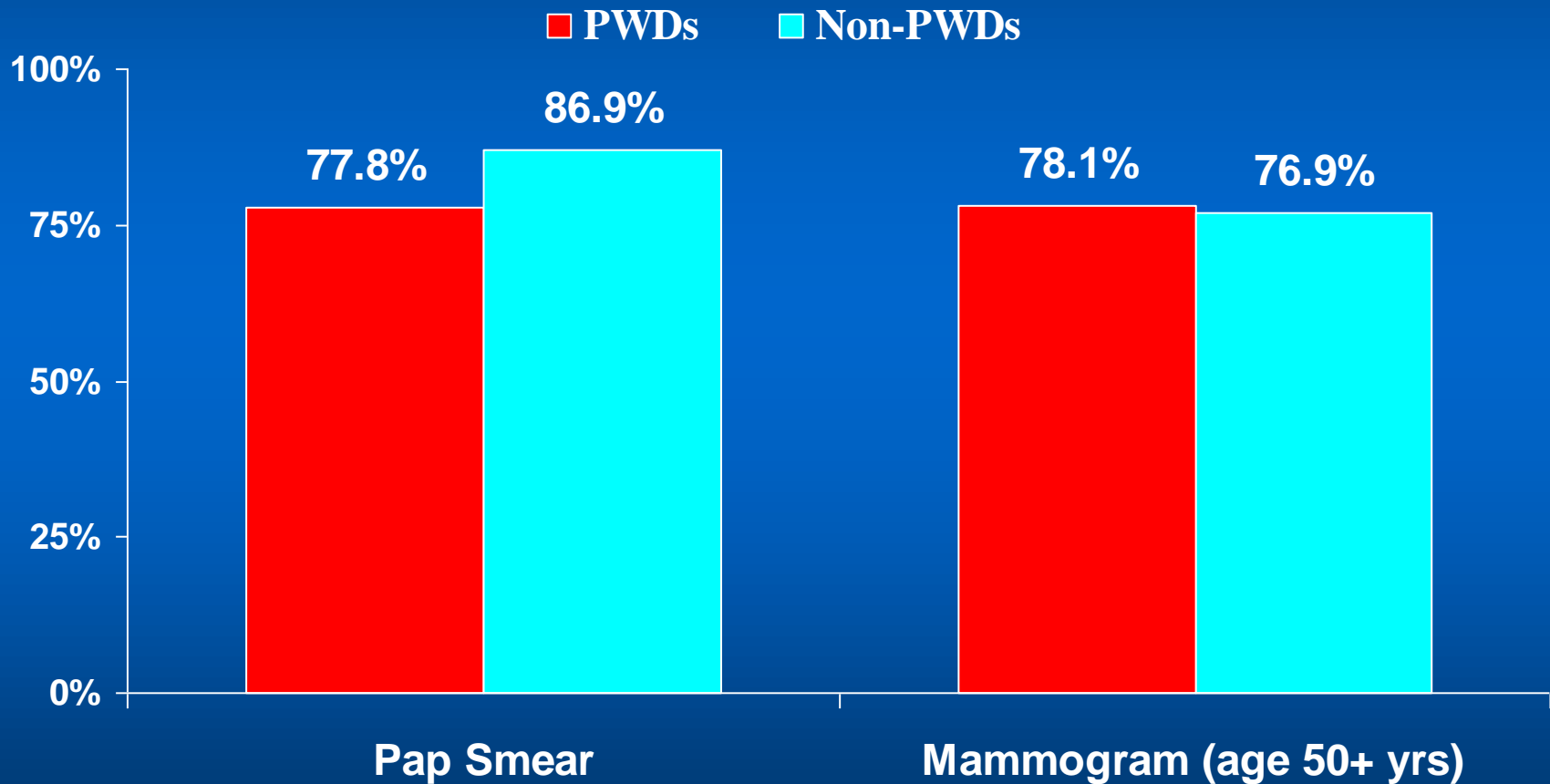
Percent with No Insurance and No Regular Source of Care (PWDs vs. Non-PWDs)



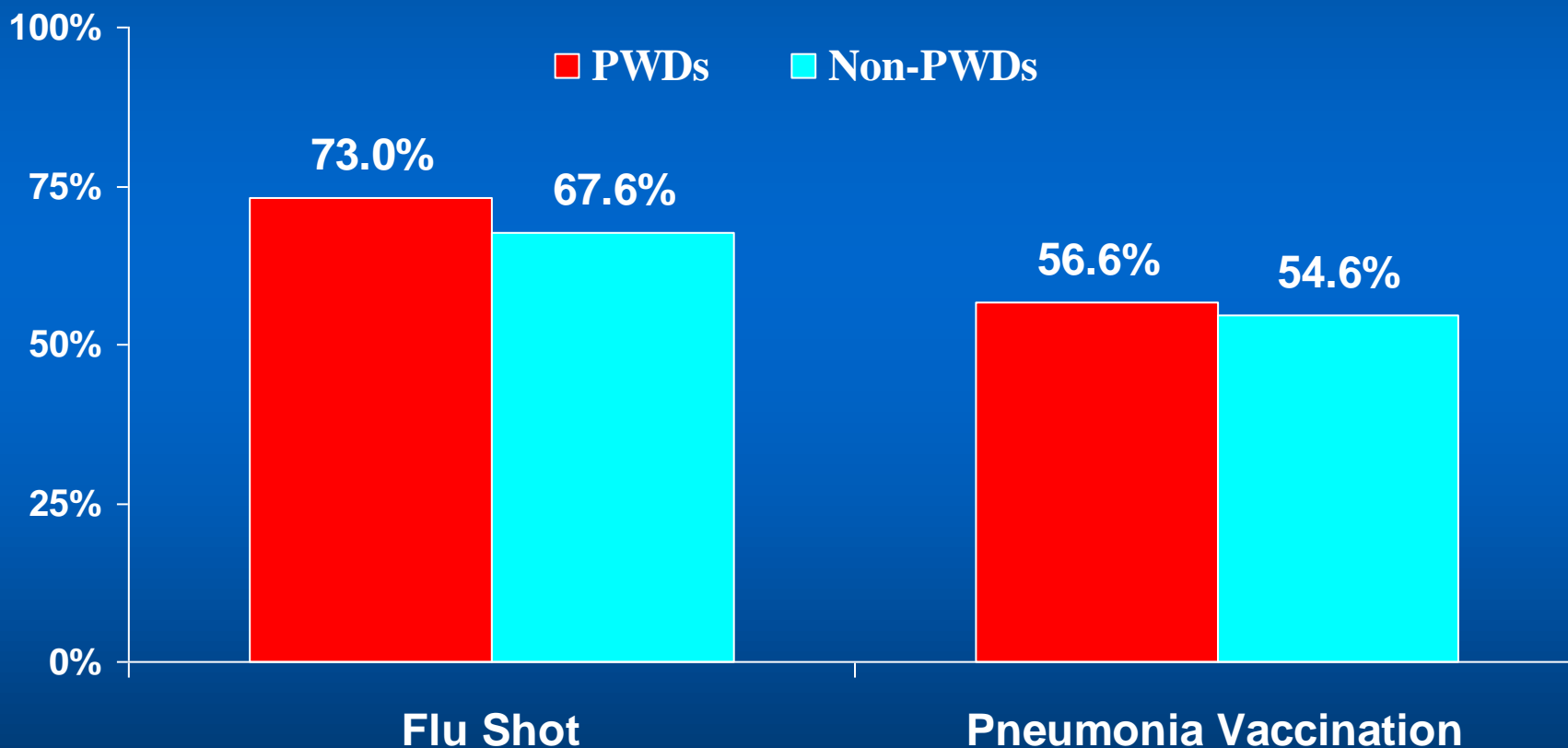
Difficulty Accessing Care & Transportation as a Barrier to Care (PWDs vs. Non-PWDs)



Women's Health Preventive Screenings (PWDs vs. Non-PWDs)



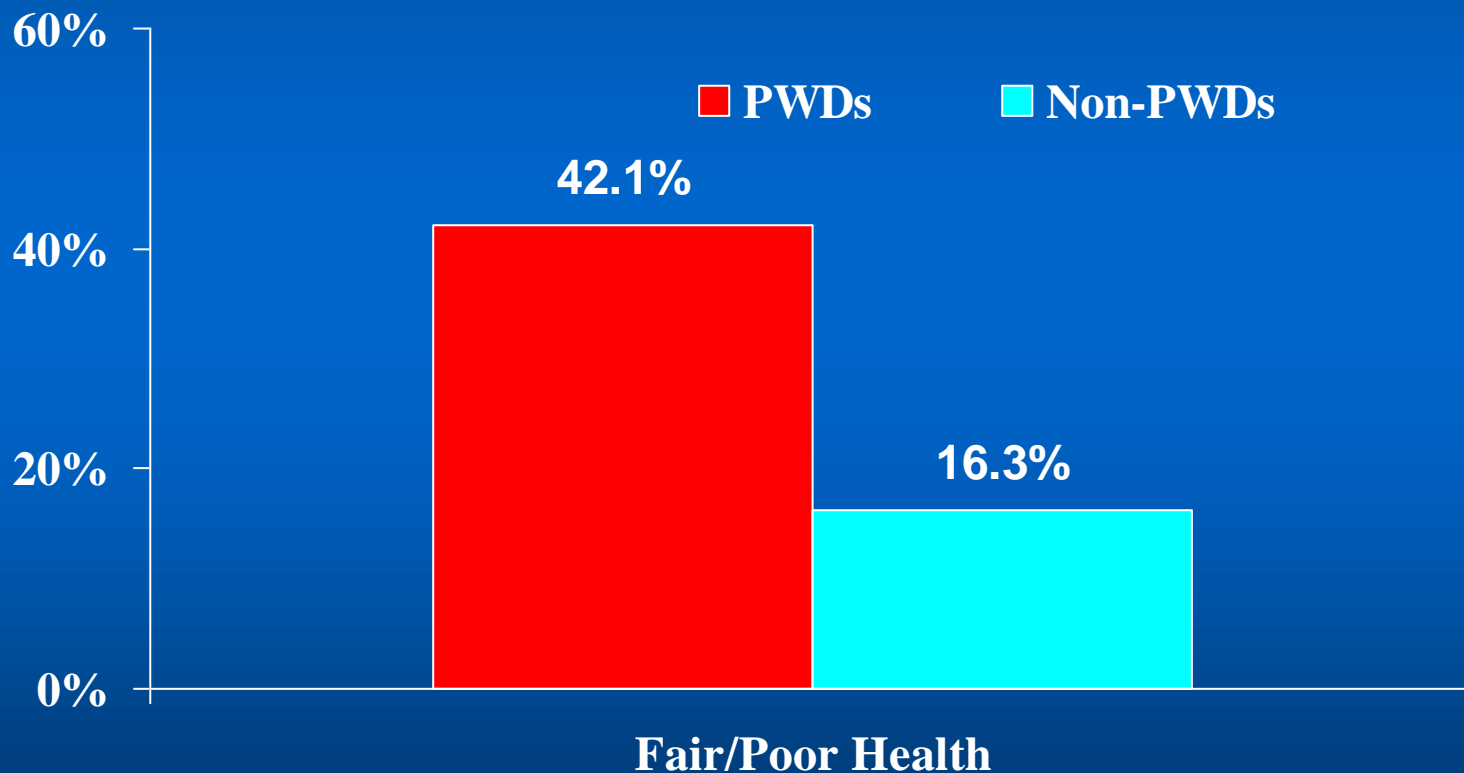
Older (Age 65+ yrs) Health Vaccinations (PWDs vs. Non-PWDs)



**Comparing
Persons with a Disability (PWD) to
Persons without a Disability:**

**Health-Related Quality of Life
(HRQOL)**

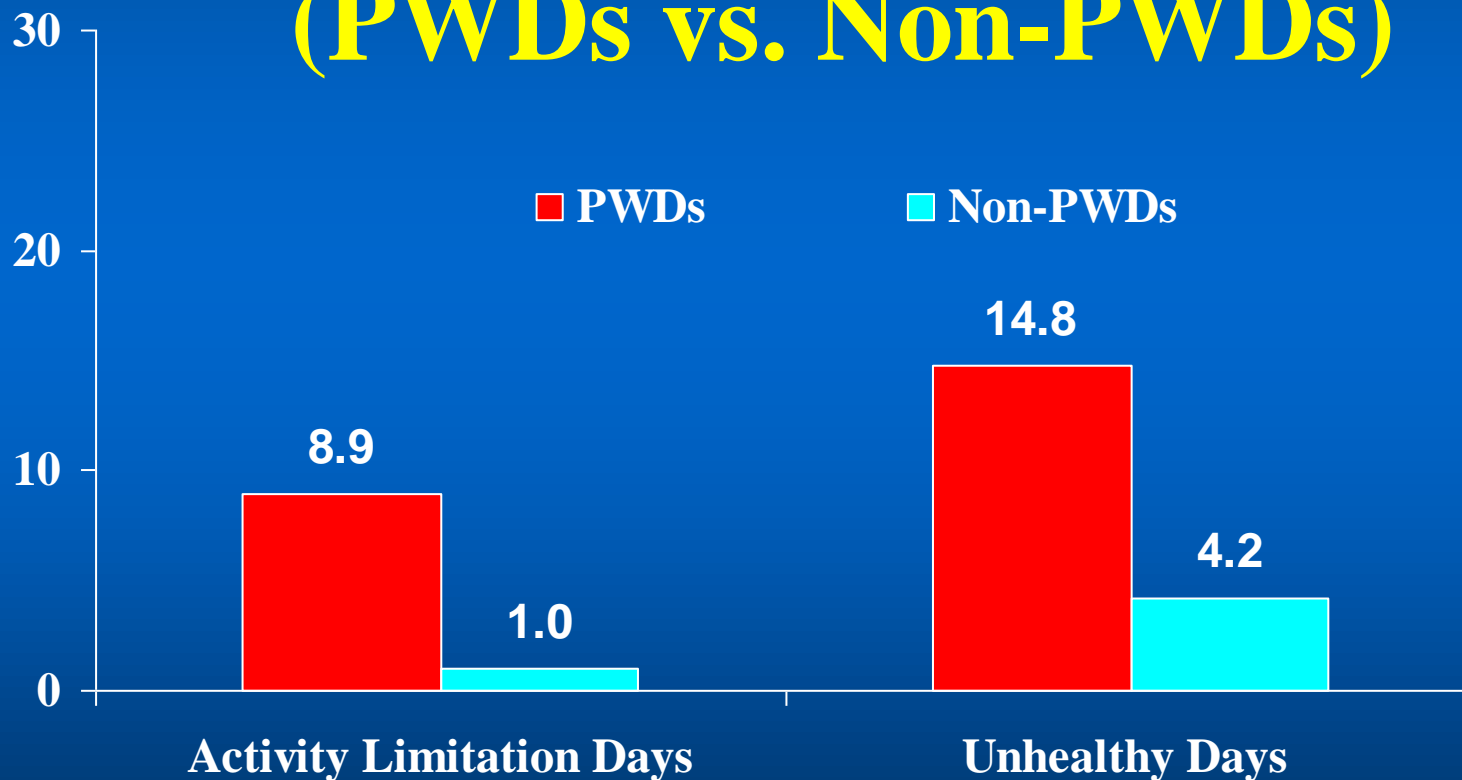
Prevalence* of Self-Reported Fair/Poor Health Status (PWDs vs. Non-PWDs)



*Age-adjusted to the 2000 U.S. standard population aged 18 years and older.

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Average Number* of Unhealthy Days & Activity Limitation Days (in the past 30 days) (PWDs vs. Non-PWDs)



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**Environmental Barriers
Impacting
Persons with a Disability
(PWDs)**

Health Care

PWDs did not get the health care they needed because of the design layout or accessibility problems at their health care provider's office

20.8%

PWDs reported having been treated unfairly by a health care provider or their staff specifically because of a disability

12.0%

Home Modifications

Special Modifications, Adaptive Equipment, Other Features

Currently had **11.7%**

Could benefit from having **22.2%**

33.9%

Social/Community/Resources

Did not participate in as many social activities would like because of their disability 60.4%

Did not know where to get information about community resources for people with disabilities 58.0%

Limitations

Minimal Estimates

- Telephone survey of the non-institutionalized (in L.A. County)
 - estimated ~ 3% of PWDs being served in institutional settings such as nursing homes or long-term care facilities, were excluded

Limitations (continued)

Minimal Estimates

- Survey was not offered in alternative formats such as TTY/TTD
- People living in households with significant mental or physical impairments may be less likely to participate in a telephone survey

The Surgeon General's Call to Action to Improve the Health and Wellness of Persons with Disabilities 2005

- Good health is necessary for persons with disabilities to secure the freedom to work, learn, and engage in their families and communities.

The Surgeon General's Call to Action (continued)

- Good health means the same for everyone whether experiencing a disability or not
 - achieving and sustaining an optimal level of wellness (both physical and mental) that promotes a fullness of life

The Surgeon General's Call to Action (continued)

Based on the Principle

- **Disability is NOT an illness**

For additional information, contact the

**Office of Health Assessment and
Epidemiology**

(213) 240-7785

or

Go to our website:

www.lapublichealth.org